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Sharon, Teitler Regev; Shahrabani, Shosh

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RESEARCH NOTE

Health precautions while traveling after COVID-19

 **Teitler Regev Sharon**

The Max Stern Yezreel Valley College, Israel

 **Shosh Shahrabani**

The Max Stern Yezreel Valley College, Israel

Abstract:

Purpose: The tourism industry needs to identify potential tourists' planned behavior after COVID-19 and prepare accordingly. This study was conducted in Israel during the initial outbreak of COVID-19. This research focused on different types of precautionary measures used by the tourists and how perceived risk of getting sick with COVID-19 while traveling abroad as well as risk perceptions and attitudes about travel abroad might affect tourists' intentions to adopt precautionary measures when planning future travel abroad.

Methods: This research is based on an online survey questionnaire distributed during March 2020 among four hundred and six Israeli participants.

Results: The analytical model show that people's with higher levels of attitudes toward traveling abroad and those that prefer to avoid destinations with higher levels of attitudes toward traveling abroad and those that prefer to avoid travel to destinations with various risks had higher intentions to take precautionary measures while traveling abroad.

Implications: The results of the current research can assist the tourism industry understand what precautionary measures are important to potential travellers and what health safety assurances the industry must provide to facilitate its recovery in the near future.

Keywords: COVID-19, tourism, health threat perception, future travel avoidance, precautionary measures

JEL Classification: I15, C38, I1

Biographical note: Teitler Regev Sharon (sharont@yvc.ac.il) is a faculty member of the Department of Economics and Management at the Max Stern Yezreel Valley College in Israel. Her current research interests are the economics of tourism, factors effecting tourism like terror or epidemics and Behavioral economics. Shosh Shahrabani (shoshs@gmail.com) is member a faculty member of the Department of Economics and Management and Head of Research Authority for The Max Stern Yezreel Valley College

1 INTRODUCTION

The year 2020 brought a new challenge to our lives with the outbreak of the COVID-19 pandemic. COVID-19 made its first appearance in China in December 2019 and by February 2020 had spread across the globe. Efforts to stop the virus from spreading, in particular through social distancing, have affected countries and markets around the world, including the tourism and hospitality sectors. In March 2020 more and more countries closed their borders to international travel, bringing the tourism industry to a complete halt. A research study conducted in China during the early stages of the epidemic exposed the devastating effects of COVID-19, specifically on China's tourism economy and international trade (Hoque, Shikha, Hasanat, Arif, and Hamid, 2020).

The current research was performed in March 2020, at the beginning of the outbreak of COVID-19 in Israel. At that time, only around 15 Israelis had been infected and none had

died. On January 30, 2020, the Israeli government limited the entrance of tourists from China, while all Israelis returning from China were required to remain in isolation for two weeks. Two weeks later, the isolation requirement was extended to tourists returning from all countries in the Far East. On February 26, the government recommended that Israeli citizens avoid all international travel. Like travelers around the world, many Israelis were forced to cancel their planned flights or reschedule them for a later date. The crisis brought on by the pandemic of COVID-19 naturally effected potential tourists' perceived susceptibility to infection by the new virus as well as on their risk perceptions regarding health hazards in destinations countries. Moreover, the new pandemic may affect potential tourists' general attitudes about traveling abroad. The current study seeks to test the effect of risk perceptions amongst potential Israeli tourists during the early stages of the pandemic on their intentions to take precautionary measures in planning future travel abroad.

2 LITERATURE AND HYPOTHESES

Previous studies have shown that various perceived risks, among them terrorist incidents, wars, political instability, natural disasters and epidemics, have had a negative effect on tourist numbers (Teitler-Regev, Shahrabani, and Goziker, 2014, Desivilya, Teitler-Regev, and Shahrabani, 2015, Baker, 2015, Avraham, 2015, Liu, and Pratt, 2017). Indeed, epidemics have a negative effect on economies that far exceeds the impact on health. For example, the SARS outbreak in 2003 resulted in 10,000 infected people, 1,000 deaths and economic damage ranging from 30 to 100 billion US dollars (Smith, 2006). According to Smith, an epidemic's effect on tourism specifically and on the economy in general is driven by the public's perception of the risk of being infected. As the effects of health crises and other disasters engender serious economic losses and major social costs, it is vital to understand the determinants that shape risk perceptions and attitudes regarding travel decisions and behavior.

A significant amount of research has examined the effects of health risk and health awareness on tourists' behavior. This research shows that individual tourists characteristics have a major effect on their risk perceptions. Specifically, the influence of risk perception was found to be associated with type of risk, tourist's culture or nationality, proximity to the country of origin and international media coverage (Baker 2015). A study in the USA that examined tourism after the SARS outbreak showed that people intended to increase domestic tourism, cut down on international and long distance trips, use private cars more often, and visit rural locations (Wen et al., 2005). Cai (2003) assumed that the effect of SARS on tourists would increase the number of independent tourists, family parties and corporate groups, the demand for destinations and attractions concerning fewer links with people, for example and ecotourism and natural tourism, would increase, and tourists would prefer open and well-ventilated facilities. In addition, Wen et al. (2005) found that the SARS epidemic increased the public's attention to hygiene. Therefore, the researchers predicted that hygiene and safety would become important factors in tourists' opinions regarding a destination's image.

Studies show that regarding health risks, tourists' perceptions about potentially dangerous areas are wider and more inclusive than in the case of other types of risks. Risks in general, and specifically health risks, motivate tourists to seek information that might help reduce risks and uncertainties, choose the favorite destination and improve the quality of their trip (Mansfeld, 2006; Fotiadis and Sigala, 2015; Milwood and Crick, 2021).

Perceptions regarding personal health and well-being affect protective and preventative behavior, like purchasing travel insurance or getting vaccinated prior to traveling abroad (Chien, Sharifpour, Ritchie, and Watson, 2017). Studies that focused on the general population concluded there is a strong to moderate positive relationships between perceived risks and protective health behaviors (Schmiede, Bryan, and Klein, 2009; Christou et al., 2021).

Chien et al. (2017) introduced a conceptual model in which perceived control over the situation, worry, and sensation-seeking affect travel risk perceptions, and in turn those

perceptions affect risk-protective behavior. A study that included 807 outbound tourists from Australia found that travel health risk perceptions mediated the correlation between risk-protective behavior and traveler experiences. That is, worry motivated protective behavior by means of increased health risks perceptions. Moreover, while sensation-seeking is negatively correlated with travel health risk perceptions, it is positively related to protective behavior. Those with high levels of sensation-seeking but no information regarding precautionary measures will avoid potentially hazardous situations. If, however, they have knowledge about preventative measures they will employ protective behavior and engage in the potentially risky activity.

The current study seeks to inspect the impact of risk perceptions and attitudes toward traveling abroad during the early stages of COVID-19 pandemic outbreak, as well as the effect of self-perception of risk of being infected by COVID-19 on travelers' intentions to take precautionary measures in planning future travel abroad. We are not aware of any previous studies that have examined this topic. The results of this research will add to the present literature concerning the implications of the COVID-19 pandemic on the tourism industry.

Hypotheses
Building on the findings of Chien et al. (2017) and Schmiede et al. (2009) that perceptions regarding personal health and well-being affect preventative and protective health behavior, we hypothesize:

H1: Individuals who have higher levels of perceived risk of being infected by COVID-19 while traveling abroad will have greater intentions to take precautionary measures in planning future travel abroad.

Based on the findings of Chien et al. (2017) that individuals with high levels of sensation-seeking together with knowledge about preventative measures will adopt precautionary actions and engage in the potentially risk activity, we hypothesize:

H2: Individuals who have higher levels of sensation-seeking will have greater intentions to take precautionary measures in planning future travel abroad.

Based on the finding of Desivilya et al. (2015) that risk perceptions with respect to hazardous events in tourist destinations affect individuals' intentions and behavior regarding travel abroad, we hypothesize:

H3: Individuals who have more definitive attitudes regarding the hazards of traveling abroad and more definitive attitudes with respect to avoiding destinations with various risks resolve in greater intentions to adopt precautionary measures in planning future travel abroad.

3 RESEARCH METHODOLOGY

This study is based on a questionnaire completed by 406 participants during the period March 4-5, 2020. Ethics Committee at the higher education institution where the authors are associated permitted this study. The research was conducted by a polling company using an Internet survey. The respondents received a link to a questionnaire and decided whether or not to answers it.

The questionnaire, which included several sections, was based on an English version and translated into Hebrew by

the researchers using the back-translation method. All questions were based on a 7-point Likert type scale from 1 (“do not agree at all”) to 7 (“very much agree”). The details of the questions included in each section appear in appendix A. The sections were:

- Travel experience and plans: Questions regarding prior trips abroad and the effect of the outbreak of COVID-19 on future plans to travel abroad.
- Self-perceived risk of being infected by COVID-19 while traveling abroad: “During your vacation abroad you may be infected by the coronavirus” (self-perceived risk of COVID-19 while traveling abroad).
- Attitudes toward traveling abroad (e.g., “traveling abroad now is dangerous”): This section is based on Floyd et al. (2003), as tested and validated by Desivilya et al. (2015). Scores on this scale were averaged to form an independent variable. The internal consistency reliability (Cronbach's alpha) of this scale was 0.796.
- Attitudes toward avoiding travel to destinations with various risks: This section is based partially on Floyd et al. (2003), also tested and validated by Desivilya et al. (2015) and Shahrabani et al. (2019). A sample item is: “Travel to destinations with health hazards (e.g., infections, disease) should be avoided.” The internal consistency reliability (Cronbach's alpha) of this scale was 0.865.
- Precautionary travel measures: In this section we asked about precautionary measures the individual took in the past and intends to take such measures in the future (e.g., searching for information regarding health requirements for traveling to a particular country). Two independent variables were formed based on the averages. The internal consistency reliability measures (Cronbach's alpha) for these scales were 0.746 and 0.901, respectively.
- Sensation-seeking (based on the questionnaire in Chien et al. (2017): In this section, the participants received the statement: “I am willing to travel to unconventional destinations.” Since the internal consistency reliability (Cronbach's alpha) of this scale was low, we used only one item.
- The research included data regarding gender, age, education, number of trips abroad, income level and number of children at home and other socio-demographic. In addition, the participants were asked “To what extent will the Ministry of Health's recommendation not to travel abroad for the next six months affect your travel plans?”

4 FINDINGS AND ANALYSIS

During the survey (March 2020), 51% of the respondents had already booked a flight abroad prior to the pandemic and 49% had not, while 60.3% were planning to travel during the six months after the survey. Of those who had booked a flight, 37% decided to change their plans, while 63% stated they had not changed their plans. More specifically, 29.6% indicated they would postpone deciding whether to travel abroad,

20.9% stated they would cancel their vacation, 19% said they would postpone their vacation, 16% said they would not change their plans due to COVID-19, and 5.7% indicated they would change their travel destination.

Among the respondents, 41.9% showed a low level of worry about being infected with COVID-19 while traveling abroad (less than 4 points on a scale of 7), while 37.2% indicated a high level of concern (4 points and above). The majority of the sample (78.3%) indicated they intend to take precautionary measures while traveling abroad in the future. Table I shows the descriptive statistics of the sample. The socio-demographic characteristics are shown separately for those with low intentions to take precautionary measures (respondents who responded less than 4 points) and those with high intentions (more than 4 points) to take precautionary measures. Those who answered 4 were omitted to emphasize the distinction between the high and low intention groups.

Table 1: Descriptive statistics of the sample: Socio-demographic characteristics by status of intention to take precautionary measures prior to and while traveling abroad

Variable		N=406 (%)	Low intentions to take precautionary measures (%) N=88	High intentions to take precautionary measures (%) N=304
Gender	Male	49.5	61.4	46.4
	Female	50.5	38.6	53.6
Marital status	Unmarried	32	36.4	31
	Married	68	63.6	69
Income	Below average	34.2	39.3	35.8
	Average and above average	57.4	60.7	64.2
Education	12 years of school	28.1	35	26.3
	Higher education	71.9	65	73.6

Based on Table 1 it can be seen that the percentage of women reporting high intentions to take precautionary measures before and while traveling abroad was significantly higher than that of men (53.6% compared to 46.4%, p value <0.05). No significant differences were found between the two groups regarding the other demographic variables.

Table II shows the means and SDs of the explanatory variables—attitudes toward avoiding travel to destinations with various risks, attitudes toward traveling abroad, risk perception regarding being infected with COVID-19 while traveling abroad, sensation-seeking, and use of precautionary measures in the past—classified according to level of intentions to take precautionary measures before and during trips abroad.

Table 2: Means and SDs of explanatory variables classified according to level of intention to take precautionary measures before traveling abroad

	Low level of intentions to take precautionary measures N=88		High level of intentions to take precautionary measures N=304	
	Mean	SD	Mean	SD
COVID-19 self-risk while traveling abroad	2.82	1.61**	4.17	1.18
Attitudes toward avoidance of travelling to destinations with various risks	3.78	1.16***	5.02	1.14
Attitudes toward traveling abroad	3.88	1.14***	5.3	.95
Sensation-seeking	4.43	1.82	4.71	1.87
Past precautionary measures	3	1.08***	4.56	1.52

Table 2 shows that those with high intentions to take precautionary measures before and during future trips abroad also have significantly higher perceived levels of personal risk of being infected by COVID-19 while traveling abroad, more definitive attitudes about avoiding travel to destinations with various risks, more definitive attitudes about traveling abroad, and a higher frequency of taking precautionary measures when traveling abroad in the past.

The analytical model included OLS regression analysis. In the regression, the dependent variable was the degree of intention to use precautionary measures while traveling abroad in the future. The independent variables included self-perceived risk of being infected by COVID-19 while traveling abroad, attitudes toward traveling abroad (travel attitudes), past precautionary measures (past measures), level of sensation-seeking, number of trips abroad for work or vacation (N_vacations, N_work), past travel to countries with travel advisories, attitudes toward avoiding travel to destinations with various risks, number of children at home (no. children), age, gender, and education. After several iterations, we chose the final version of the regression that has the best adjusted R square, as shown in Table 3.

Table 3: Regression results, with intention to take precautionary measures while traveling abroad as the dependent variable

Variable	B	Std. Error	Sig.
Constant	-.11	.29	.69
Self-perceived risk of COVID-19 while traveling abroad	0.08	.03	.02
Travel attitudes	.55	.06	.00
Past precautionary measures	.28	.08	.00
Sensation-seeking	.008	.03	.01
Attitudes toward avoiding travel to destinations with risks	.15	.05	.00
(adjusted R square 0.546 P=0.000)			

The results in Table 3 show the following significant variables that affect intentions to take precautionary measures before and during trips abroad: higher levels of perceived risks of being infected by the coronavirus, higher perceived risks of traveling abroad, higher levels of precautionary measures in the past while traveling abroad, more definitive attitudes about avoiding travel to destinations with various risks, and higher levels of sensation-seeking.

5 DISCUSSION

COVID-19 has dramatically changed the global tourism industry. No one knows when the tourism industry will recover and people will start traveling again. Nevertheless, it is important to understand the factors affecting people's intentions to take precautionary measures while planning their trips abroad after the global pandemic crisis ends.

The current study, conducted during the early stages of the outbreak of COVID-19 in Israel, examined whether and how perceived risk of being infected by COVID-19 while traveling abroad and attitudes toward traveling abroad are correlated with Israelis' intentions to adopt precautionary measures when planning future trips abroad.

The results of the analytical model show that people's intentions to take precautionary measures while traveling abroad were significantly related to higher levels of perceived risk of being infected by COVID-19 during their travels and more definitive attitudes about avoiding traveling to destinations with various risks. These results support hypotheses H1 and H3 and are in line with previous research by Chien et al. (2017), Schmiede et al. (2009) and Desivilya et al. (2015). Our findings are also in line with previous studies showing that perceived threat was one of the main factors affecting risk-averse behavior during the SARS pandemic (Smith, 2006; Varti et al., 2009).

Another interesting finding of this study is that during the COVID-19 pandemic those with higher levels of sensation-seeking also have greater intentions to take precautionary measures during future travel abroad (H2). This finding is compatible with those of Chien et al. (2017) showing that those who have high levels of sensation-seeking and are also aware of the preventative measures will adopt these measures and engage in the potentially risky activity. The findings of Turnšek et al. (2020) indicate that those with more travel experience in the past are less likely to avoid travel due to the COVID-19 pandemic. Our results add to this finding by showing that precautionary measures taken in the past while traveling abroad are also related to intentions to adopt precautionary measures in the future, such as buying a wider health insurance and flight cancellation insurance before traveling abroad.

6 CONCLUSIONS

What makes this study unique is that it was performed during the early stages of the COVID-19 outbreak and examined how the worldwide spread of this novel virus affected potential travelers' attitudes, risk perceptions and intentions to take precautionary measures during future travel. The findings of the current study may help the tourism industry understand what precautionary measures are important for potential travelers so as to facilitate the recovery of this industry in the near future. In addition, the pandemic has emphasized the need for public dissemination of health risk information to travelers (Abrams et al., 2020; Wang and Lopez, 2020; Krakover and Corsale, 2021; Chatzigeorgiou and Christou, 2021) and the need for the tourism industry to provide assurances regarding health safety (Zhang et al., 2020).

The study's limitations are that it was conducted in one country only and that the sample was relatively small. Despite these limitations, the findings can shed light on how the pandemic affects people's intentions to be more careful when traveling abroad in the future. Further research should examine this impact in other countries and at various points in time.

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Appendix A

Variable name		Cronbach's alpha
Attitudes toward traveling abroad	I do not feel comfortable traveling abroad now.	0.8
	Traveling abroad now is dangerous.	
	Visiting crowded places abroad should be avoided because of COVID-19.	
	Traveling to the Far East (Asia) on vacation is safe (reversed).	
	Security is an important issue when choosing a vacation destination abroad.	
	Extra security measures at airports makes traveling abroad safer.	
	I am not comfortable traveling abroad because of the risk of being infected by viruses at airports and on airplanes.	
Precautionary travel measures - past	I search for information regarding traveling advisories for certain countries.	0.75
	I search for health information about my destination (vaccines, medicines).	
	I purchase extended health insurance.	
	I purchase travel cancellation insurance.	
Precautionary travel measures - future	I avoid traveling to countries with traveling advisories issued by the Health and Foreign Ministries.	0.90
	I search for health information about my destination (vaccines, medicines).	
	I purchase extended health insurance.	
	I purchase travel cancellation insurance (if possible).	
	I take protective measures such as wearing face masks and using alcohol-based hand sanitizers at airports and on trains abroad.	
	I wear masks in public places abroad.	
	I avoid crowded places.	
Attitudes toward avoiding travel to destinations with various risks	Travel to destinations where there were terrorist incidents during the current year should be avoided.	0.87
	Travel to destinations with health hazards (e.g., infections, disease) should be avoided.	
	Travel to destinations with unstable economic conditions should be avoided.	
	Travel to destinations that are risky for Israelis should be avoided.	